

10/560939

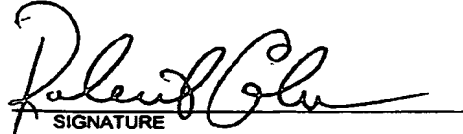
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Date: December 15, 2005

IAP9 Rec'd PCT/PTO 15 DEC 2005

- a. ☐ A check in the amount of \$ _____ to cover the above fees is enclosed.
- b. ☒ Please charge my Deposit Account No. 12-1095 in the amount of \$ 2,060.00 to cover the above fees.
A duplicate copy of this sheet is enclosed.
- c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 12-1095. A duplicate copy of this sheet is enclosed.
- d. ☐ Fees are to be charged to a credit card. **WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.

SEND ALL CORRESPONDENCE TO:


SIGNATURE

Robert B. Cohen
NAME

CUSTOMER NUMBER: 000530

32,768
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12/06/2006 SVIGIL 00000001 121095 10575501
01 FC:1642 400.00 DA

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